STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulationec. OF STATE

Return to: Secretary of State, 500 E	. Capitol, Pierre, SD	57501-5077		
1. TITLE OF NEWSPAPER	PER		2. DATE 11-9-06	
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH	NCY OF ISSUE 3A. NO. OF ISSUES PUBLISHED ANNUALLY			
Mark 111		PRICE \$ 200 Comp		ties
City County State and 710+4 Code)				2750 out
(Not printers) 57273 -				of stat
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIF 4 Code) (Not printers) 1/8 N. Wain St. P.C. Box 47 - Wawbaij - Daij - 5D 57273 - 5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) P.C. Box 47 - Wawbaij - 5D 57275 CC47				
PUBLISHER (Not printers) IX V. IVIA in St.				
POBLISHER (Not printers) PO BOX 47- Wanday, 3D 57273 CC47				
6. FULL NAME OF PUBLISHER: Linea M. Walters				
7 OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and				
addresses of stockholders owning or holding I percent or more of total amount of stock. If not owned by a corporation, the				
names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.				
FULL NAME	COMPLETE MAILING ADDRESS			
	10 2 · 114 1 1 2 2 57 17 37 3-1147			
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1				
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING TO PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so				
state. If more space is needed, list on back of this form.				
None	AVERAGE NO. C	OPIES ACTIVAL D	IO CODIES	
9. EXTENT AND NATURE OF CIRCULATION	EACH	ISS	NO. COPIES UED	
9. EXTENT AND NATURE OF CIRCULATION	ISSUED PRECEDI MONTHS	NI(2 1 7)	FILING DATE	
A. TOTAL NO. COPIES (Net Press Run)	700	70	0	
B.PAID AND/OR REQUESTED CIRCULATION				
 Sales through dealers and carriers, street vendors and 	375	2.	15	
counter sales.	0/3		<i>.</i>	
2. Mail Subscription (Paid and or requested)	285	3	73	
C.TOTAL PAID AND/OR REQUESTED CIRCULATION	, ,	1-1	L.S	
(Sum of 9B1 and 9B2)	660	67		
D.FREE DISTRIBUTION	1		M	
1. BY MAIL, CARRIER OR OTHER MEANS	1		/	
2. SAMPLES, COMPLIMENTARY AND OTHER FREE	喜 多		150	
COPIES			1 2	
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	672		t3	-
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	25		37	
2. Return from News Agents G.TOTAL (Sum of E, F1 and F2 – Should equal net press run				1
shown in A)	700		00]
Statement must be signed by Publisher, Business Mana	ger, or Owner in th	e presence of a Notary	Public	
I swear that the statements made by me are true, o	correct, and comp	olete:		
Lynde B. Walters	(Oursel)	Huberber	y	
(Signature) (Title)				
State of South Dakota Sworn to before me this 17 day of 1 20 2 20 2 20 20 20 20 20 20 20 20 20 20				
8 janta fillet				
County of tax) Notary Public				*_ i_
My commission expires: Paula J. Beiso				The second secon
(Seal) (Seal) Notary Public, DAK COUNT My Commission Exp				
JANUARY 30, 2010				
Form: SOS REC 051 7/2004		•		